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Bib Data Sheet

CONFIRMATION NO. 8647

<b>SERIAL NUMBER</b> 09/683,104	<b>FILING OR 371(c) DATE</b> 11/19/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> SUR3	
<b>APPLICANTS</b> Thomas C. Kienzle III, Lake Forest, IL; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/249,695 11/17/2000 <b>** FOREIGN APPLICATIONS *****</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 23446					
<b>TITLE</b> ENHANCED GRAPHIC FEATURES FOR COMPUTER ASSISTED SURGERY SYSTEM					
<b>FILING FEE RECEIVED</b> 498	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		